

OSAH FORM 1

This form is available online at <http://www.ganet.org/osah/form.html> or by telephone request at (404)657-2800.

OSAH USE ONLY DOCKET NUMBER:	AGENCY DMVS	CASE CODE ALS	DOCKET NUMBER	COUNTY	JUDGE
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USE FOR ADMINISTRATIVE LICENSE SUSPENSION HEARINGS ONLY ARISING UNDER OCGA ' 40-5-67.1

COUNTY OF OCCURANCE: _____

DATE OF HEARING REQUEST _____

LICENSEE

NAME:	TEL NO:	FAX NO:
CURRENT ADDRESS INCLUDING ZIP CODE AS SHOWN ON HEARING REQUEST:	LICENSE NO #:	EMAIL:
	STATE:	

LICENSEE'S ATTORNEY:

HEARING REQUEST FILED BY: ☐ LICENSEE ☐ LICENSEE'S ATTORNEY*

***ONLY INDICATE AN ATTORNEY IF THE ATTORNEY AND NOT THE LICENSEE HAS REQUESTED THE HEARING. A CLIENT'S DESIGNATION OF AN ATTORNEY DOES NOT CONSITUTE AN ENTRY OF APPEARANCE FOR THE ATTORNEY**

NAME:	TEL NO:	FAX NO:
CURRENT ADDRESS INCLUDING ZIP CODE:	GEORGIA BAR #:	EMAIL:

OFFICER

NAME:	TEL NO:	FAX NO:
POLICE DEPARTMENT ADDRESS INCLUDING ZIP CODE:	BADGE #:	EMAIL:

DMVS (PROVIDE ONLY WITH COPIES OF CONTINUANCES AND DECISIONS)

NAME: GEORGIA DEPARTMENT OF MOTOR VEHICLE SAFETY ADMINISTRATIVE UNIT	TEL NO: (678) 413-8400	FAX NO: (678)413-8450
CURRENT ADDRESS INCLUDING ZIP CODE: PO BOX 80447 CONYERS, GA 30013	AGENCY CONTACT PERSON:	EMAIL:

INDICATE DOCUMENTS ATTACHED:

- ☐ DMVS Form 1205
- ☐ Hearing request by Licensee or attorney
- ☐ DMVS notice regarding extension of driving privileges pending hearing
- ☐ Licensee's driving record printout
- ☐ OTHER, please specify, if any: _____